M	T	D	V	BL	Λ	B/E	V
W		n		DI	. A	IN	V

PLEASE TYPE	OR PRINT	Entered previous May Show						
		₩ yes	□ no					
Ms.  ☐ Mr. Artist	MARY	MILLER						
☐ Mr. Artist	MAK	/// / / / / / / / / / / / / / / / / / /	Last Name Last)					
Permanent 194 Address St	118 RAYMO	ND MAPL	Last Name Last)					
St	reet		City					
44137	Tel. (>16)	475-714	5					
Zip	Area Code							
Temporary or Studio Address.	1012 PR	OSPECT 5	O CLEVE					
	011001		0,11					
44115	Tel. (216)	566-72	62					
Zip	Area Code							
If you do not presently live in one of the counties of the								
Western Reserve, which county were you born in?								
		·						
Collaborator								
	(If Any)							
If May Show entries are not accepted or not sold:								
Artist will pick up at Museum.								
☐ Museum should dispose of.								
☐ Museum should ship to artist C.O.D. at this address:								
Special Instruct								
When necessary	include below in	netriletione or a	drawing of					

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

DO NOT DETACH

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Many hubble

THIS SECTION

REJECTED

REJECTED

DATE